

Fill in this information to identify the case:

Debtor name **Fretz Construction Company**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS, HOUSTON DIVISION**Case number (if known) **17-33832**☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

Harris County, et al.
c/o John P. Dillman
P.O. Box 3064
Houston, TX 77253-3064

Date or dates debt was incurred
Various

Last 4 digits of account number

Specify Code subsection of PRIORITY
 unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☒ Unliquidated☐ Disputed

Basis for the claim:

Personal Property Taxes

Is the claim subject to offset?

☒ No☐ Yes

Total claim

Priority amount

Unknown**Unknown**

2.2 Priority creditor's name and mailing address

Internal Revenue Service
Centralized Insolvency Operations
P.O. Box 7346
Philadelphia, PA 19101-7346

Date or dates debt was incurred
Various

Last 4 digits of account number

Specify Code subsection of PRIORITY
 unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☒ Unliquidated☐ Disputed

Basis for the claim:

Payroll Taxes and Unemployment Taxes

Is the claim subject to offset?

☒ No☐ Yes**Unknown****\$0.00**

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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
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| 2.3 | Priority creditor's name and mailing address Texas Workforce Commission Labor Law Payment Division P.O. Box 684483 Austin, TX 78768-4483 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Unknown | \$0.00 |
| Date or dates debt was incurred Various | | Basis for the claim: Unemployment Taxes | | |
| Last 4 digits of account number | | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | | | | |

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

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| | | | Amount of claim |
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| 3.1 | Nonpriority creditor's name and mailing address A Affordable Insulators 17515 Colony Creek Dr. Spring, TX 77379 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.2 | Nonpriority creditor's name and mailing address AAA Paymaster Sales & Service 4660 Beechnut, Suite 209 Houston, TX 77096 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$427.59 |
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| 3.3 | Nonpriority creditor's name and mailing address ABC Doors, Inc. P.O. Box 20485 Houston, TX 77225-0485 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.4 | Nonpriority creditor's name and mailing address ACS Flooring Group, Inc. 1289 N. Post Oak Road, Suite 190 Houston, TX 77055 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,975.00 |
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| 3.5 | Nonpriority creditor's name and mailing address Action Parking Area Maint. P.O. Box 2144 Pearland, TX 77588-2144 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| Debtor Fretz Construction Company | | Case number (if known) 17-33832 |
| Name | | |

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| 3.6 | Nonpriority creditor's name and mailing address Action Trucking Company P.O. Box 670506 Dallas, TX 75267-0506 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,913.12 |
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| 3.7 | Nonpriority creditor's name and mailing address Acton Mobile Industries, LLC P.O. Box 758689 Baltimore, MD 21275-8689 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,646.23 |
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| 3.8 | Nonpriority creditor's name and mailing address Adams Insurance Services, Inc. P.O. Box 7011 Houston, TX 77248-7011 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$18,758.00 |
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| 3.9 | Nonpriority creditor's name and mailing address AECO Interior Contractors P.O.Box 10378 Houston, TX 77206 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.10 | Nonpriority creditor's name and mailing address AFA Systems, Inc. 4719 Ingersoll Street Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$16,692.23 |
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| 3.11 | Nonpriority creditor's name and mailing address Alpha Threaded Products 6426 Long Drive Houston, TX 77087 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$236.85 |
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| 3.12 | Nonpriority creditor's name and mailing address Aluminium Techniques, Inc. 13302 Redfish Lane Stafford, TX 77477 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| Debtor | Fretz Construction Company <small>Name</small> | Case number (if known) | 17-33832 |
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| 3.13 | Nonpriority creditor's name and mailing address Always In Season, Inc. P.O. Box 271502 Houston, TX 77277-1502 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$518.54 |
| | | | |
| 3.14 | Nonpriority creditor's name and mailing address American Door Products P.O. Box 55187 Houston, TX 77255 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$26,386.00 |
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| 3.15 | Nonpriority creditor's name and mailing address American Fence Company 13222 Reeveston Rd. Houston, TX 77039 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,625.12 |
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| 3.16 | Nonpriority creditor's name and mailing address American Fixtures P.O. Box 2086 New Caney, TX 77357-2086 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,600.00 |
| | | | |
| 3.17 | Nonpriority creditor's name and mailing address American Life Insurance Corp. P.O. Box 82590 Lincoln, NE 68501 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$0.00 |
| | | | |
| 3.18 | Nonpriority creditor's name and mailing address Ameritas Life Ins. Corp. P.O. Box 82590 Lincoln, NE 68501 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,697.55 |
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| 3.19 | Nonpriority creditor's name and mailing address Anne Whitlock and Michael Skelly 1001 McKinney St., Suite 700 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |

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| Fretz Construction Company | 17-33832 | |
| 3.20 Nonpriority creditor's name and mailing address Architectural Floors 1803 Allen Parkway Houston, TX 77019 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.21 Nonpriority creditor's name and mailing address Associated Gen. Contractors 3825 Dacoma Street Houston, TX 77092 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,900.00 |
| 3.22 Nonpriority creditor's name and mailing address Athene Annuity and Life Co. P.O. Box 29047 New York, NY 10087-9047 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$634.88 |
| 3.23 Nonpriority creditor's name and mailing address B & D Contractor, Inc. c/o Lisa M. Norman 1885 St. James Place, 15th Floor Houston, TX 77056 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.24 Nonpriority creditor's name and mailing address Banks Plastering 26009 Budde Rd., Bldg. B-100 Spring, TX 77380 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.25 Nonpriority creditor's name and mailing address Bayou City Masonry 6113 Clyde St. Houston, TX 77007 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.26 Nonpriority creditor's name and mailing address Beirne, Maynard & Parsons, LLP P.O. Box 27457 Houston, TX 77227-7457 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$133,140.16 |

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| 3.27 | Nonpriority creditor's name and mailing address Big 4 Steel Services, L.P. 27444 E Hardy Rd Spring, TX 77373-2701 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.28 | Nonpriority creditor's name and mailing address Big City Access Holdings, LLC P.O. Box 678014 Dallas, TX 75267-8014 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$27,194.76 |
| 3.29 | Nonpriority creditor's name and mailing address Big Tex Welding Supply 6836 Long Drive Houston, TX 77087 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$913.47 |
| 3.30 | Nonpriority creditor's name and mailing address Brandt Electrical Services, Inc. 751 Carolina, Suite 400 Katy, TX 77494 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor w/ Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.31 | Nonpriority creditor's name and mailing address Bruegging Company 11226 Charles Rd Houston, TX 77041 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.32 | Nonpriority creditor's name and mailing address Bugtime Termite & Pest Control 235 FM 1960 East Bypass Humble, TX 77338 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.33 | Nonpriority creditor's name and mailing address Builders Gypsum Supply, LLP P.O. Box 731242 Dallas, TX 75373-1242 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$568.11 |

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| 3.34 | Nonpriority creditor's name and mailing address Burns DeLatte & McCoy, Inc. 320 Wescott Houston, TX 77007 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$19,053.20 |
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| 3.35 | Nonpriority creditor's name and mailing address Burts Construction, Inc. 26117 Highway 249 Tomball, TX 77377-7356 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.36 | Nonpriority creditor's name and mailing address Buyers Barricades P.O. Box 7498 Fort Worth, TX 76111 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,087.75 |
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| 3.37 | Nonpriority creditor's name and mailing address Chamberlin Houston, LLC 7510 Langtry Houston, TX 77040 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor w/ Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.38 | Nonpriority creditor's name and mailing address Champion Rentals, Inc. 6903 North Shepherd Houston, TX 77091 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor w/ Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.39 | Nonpriority creditor's name and mailing address Circle Saw Builders Supply 2510 Ella Boulevard Houston, TX 77008 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,607.19 |
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| 3.40 | Nonpriority creditor's name and mailing address CKC Steel Erectors, LLC P.O. Box 841007 Houston, TX 77284 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
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| 3.41 | Nonpriority creditor's name and mailing address CLS Technology, Inc. P.O. Box 1066 Katy, TX 77492-1066 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.42 | Nonpriority creditor's name and mailing address Coastal Supplies and Services, Corp. 7700 Eagle Lane Spring, TX 77379 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$48,482.08 |
| 3.43 | Nonpriority creditor's name and mailing address Commercial Tile & Marble 11226 Charles Rd. Houston, TX 77041 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.44 | Nonpriority creditor's name and mailing address Concrete Cleaning, Inc. P.O. Box 73452 Houston, TX 77273-3452 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,500.00 |
| 3.45 | Nonpriority creditor's name and mailing address Conroe Welding Supply, Inc. 415 South Frazier Conroe, TX 77301 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,145.01 |
| 3.46 | Nonpriority creditor's name and mailing address Construction Ecoservices P.O. Box 672987 Houston, TX 77267 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,664.50 |
| 3.47 | Nonpriority creditor's name and mailing address Core Associates, LLC c/o Merrill Lynch 105 South Bedford Road Mount Kisco, NY 10549 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,633.00 |

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| 3.48 | Nonpriority creditor's name and mailing address CP Applications, LLC P.O. Box 590826 Houston, TX 77259-0826 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.49 | Nonpriority creditor's name and mailing address Crawford Electric Supply Company, Inc. c/o Lisa M. Norman 1885 St. James Place, 15th Floor Houston, TX 77056 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.50 | Nonpriority creditor's name and mailing address Cristo Rey Jesuit College Preparatory Sc 6700 Mount Carmel Street Houston, TX 77087 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,502.00 |
| 3.51 | Nonpriority creditor's name and mailing address D & H Masonry 10920 Darby Loop Conroe, TX 77385-7410 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.52 | Nonpriority creditor's name and mailing address David Morris, Architect 5707 Reamer Houston, TX 77096 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,040.00 |
| 3.53 | Nonpriority creditor's name and mailing address Diversified Plastering 15250 Sellers Road Houston, TX 77060 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.54 | Nonpriority creditor's name and mailing address Don F. Russell, P.C. 4635 Southwest Freeway, Suite 610 Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$315.00 |

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| 3.55 | Nonpriority creditor's name and mailing address Door King 2209 Hurfus Dr. Houston, TX 77092 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 |
| 3.56 | Nonpriority creditor's name and mailing address Dow Pipe & Fence Supply Co. 1802 Preston Road Pasadena, TX 77503 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.57 | Nonpriority creditor's name and mailing address Eickhof Columbaria, Inc. P.O. Box 537 Crookston, MN 56716 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,141.00 |
| 3.58 | Nonpriority creditor's name and mailing address Empire Steel Erectors, LP 2227 Wilson Road Humble, TX 77396 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$38,600.00 |
| 3.59 | Nonpriority creditor's name and mailing address Episcopal Health Foundation 500 Fannin Street, Suite 300 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$16,518.47 |
| 3.60 | Nonpriority creditor's name and mailing address ESC Consultants, Inc. P.O. Box 691447 San Antonio, TX 78269 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,500.00 |
| 3.61 | Nonpriority creditor's name and mailing address Excel Carpets, Inc. 511 Rankin Ciercle North Houston, TX 77073 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,380.00 |

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| 3.62 | Nonpriority creditor's name and mailing address Fast Track Specialties, Inc. 7807 Bluff Point Drive, Suite 180 Houston, TX 77086 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.63 | Nonpriority creditor's name and mailing address Fastenal Company P.O. Box 978 Winona, MN 55987-0978 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$72.73 |
| 3.64 | Nonpriority creditor's name and mailing address Fireproof Contractors, Inc. P.O. Box 550107 Houston, TX 77255-0107 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.65 | Nonpriority creditor's name and mailing address Frank H. Holcomb, P.C. 1330 Post Oak Blvd., Suite 2930 Houston, TX 77056 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,577.70 |
| 3.66 | Nonpriority creditor's name and mailing address Gainsborough Waste P.O. Box 4509-2 Houston, TX 77210-4509 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,967.51 |
| 3.67 | Nonpriority creditor's name and mailing address Graco Mechanical 5910 Schumacher Lane Houston, TX 77057-7188 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,831.88 |
| 3.68 | Nonpriority creditor's name and mailing address Graves Mechanical c/o Scott T. Citek 3730 Kirby Drive, Ste 650 Houston, TX 77098 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$68,875.00 |

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| 3.69 | Nonpriority creditor's name and mailing address GTS Window Coverings LLC 11423 Sagegrove Lane Houston, TX 77089-4623 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.70 | Nonpriority creditor's name and mailing address Gulf Coast Erectors, Inc. 5314 Spencer Highway Pasadena, TX 77505 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$22,220.00 |
| 3.71 | Nonpriority creditor's name and mailing address Gulf Storage Partners, LP P.O. Box 791003 Baltimore, MD 21279-1003 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$216.49 |
| 3.72 | Nonpriority creditor's name and mailing address HG Fire Systems, LP 15102 Sommermeyer, Suite 100 Houston, TX 77041 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,314.75 |
| 3.73 | Nonpriority creditor's name and mailing address High Quality Structural 10322 Chatteron Drive Houston, TX 77043 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.74 | Nonpriority creditor's name and mailing address Hilti, Inc. - TX Dept 0890 P.O. Box 120001 Dallas, TX 75312-0890 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,338.48 |
| 3.75 | Nonpriority creditor's name and mailing address Home Depot Dept 32-2500754670 P.O. Box 9001043 Louisville, KY 40290-1043 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,189.55 |

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| 3.76 | Nonpriority creditor's name and mailing address Iklo Glass 47 Lake Sterling Gate Dr. Spring, TX 77379 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,500.00 |
| 3.77 | Nonpriority creditor's name and mailing address Image Stone Design, Inc. 3118 Golfcrest Blvd. Houston, TX 77087 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.78 | Nonpriority creditor's name and mailing address Industrial Matt Co. P.O. Box 896 Clute, TX 77531 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,372.50 |
| 3.79 | Nonpriority creditor's name and mailing address IPlumb 308 W. Pasadena Frwy Pasadena, TX 77506 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,188.00 |
| 3.80 | Nonpriority creditor's name and mailing address Iron Access 3815 Hollister St. Houston, TX 77080-1848 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.81 | Nonpriority creditor's name and mailing address Iron Works Doors 4603 Bridgeview Lane Spring, TX 77388 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.82 | Nonpriority creditor's name and mailing address Jarrar & Company, Inc. 9119 Emmott Road Houston, TX 77040 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$746.93 |

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| 3.83 | Nonpriority creditor's name and mailing address KGI 11251 NW Freeway, Suite 450 Houston, TX 77092 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$54.13 |
| | | Basis for the claim: <u>Goods & Services</u> | | |

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| 3.84 | Nonpriority creditor's name and mailing address Kiley Advisors, LLC 99 Deteringm Suite 104 Houston, TX 77007 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,000.00 |
| | | Basis for the claim: <u>Goods & Services</u> | | |

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| 3.85 | Nonpriority creditor's name and mailing address Kirksey 6909 Portwest Drive Houston, TX 77024 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$14,008.16 |
| | | Basis for the claim: <u>Goods & Services</u> | | |

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| 3.86 | Nonpriority creditor's name and mailing address Klinger Specalties Direct, Inc. 3300 East TC Jester Blvd. Houston, TX 77018 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | Basis for the claim: <u>Subcontractor</u> | | |

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| 3.87 | Nonpriority creditor's name and mailing address Kronberg's Flags/Flagpoles 7106 Mapelridge Houston, TX 77081 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,500.00 |
| | | Basis for the claim: <u>Goods & Services</u> | | |

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| 3.88 | Nonpriority creditor's name and mailing address Lahey Electric Co. P.O. Box 40279 Houston, TX 77240-0279 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$357,559.88 |
| | | Basis for the claim: <u>Goods & Services</u> | | |

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| 3.89 | Nonpriority creditor's name and mailing address Lamm & Smith, P.C. 3730 Kirby Drive, Suite 650 Houston, TX 77098 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,000.00 |
| | | Basis for the claim: <u>Goods & Services</u> | | |

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| 3.90 | Nonpriority creditor's name and mailing address Landscape Art, Inc. 2303 Dickinson Ave. League City, TX 77573 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.91 | Nonpriority creditor's name and mailing address Larry Minns, Landscape Architect 7670 S. FM 1486 Road Montgomery, TX 77316 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$19,873.00 |
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| 3.92 | Nonpriority creditor's name and mailing address Laser Acoustics, Inc. 11391Meadowglen Lane, Suite K Houston, TX 77082 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.93 | Nonpriority creditor's name and mailing address Leon's Concrete 6641 Midfield Drive Houston, TX 77092 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.94 | Nonpriority creditor's name and mailing address Letsos Company P.O. Box 36927 Houston, TX 77236 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$28,193.00 |
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| 3.95 | Nonpriority creditor's name and mailing address Light 4202 Richmond Avenue Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$997.62 |
| | | | |
| 3.96 | Nonpriority creditor's name and mailing address Linbeck Group, LLC 3900 Essex Lane, Ste 1200 Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$0.00 |

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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
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| 3.97 | Nonpriority creditor's name and mailing address Linden-Kranz 1931 Wilderness Point Rd Kingwood, TX 77339-2240 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,063.96 |
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| 3.98 | Nonpriority creditor's name and mailing address Livingston Construction Services 719 Turkey Creek Livingston, TX 77351 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$29,050.00 |
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| 3.99 | Nonpriority creditor's name and mailing address LMS c/o Jeffrey B. Kaiser Kaiser, P.C. 2211 Norfolk, Suite 528 Houston, TX 77098 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor w/ Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| 3.100 | Nonpriority creditor's name and mailing address Lone Star Overnight P.O. Box 149225 Austin, TX 78714-9225 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$63.28 |
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| 3.101 | Nonpriority creditor's name and mailing address Lowe's Commercial Services 4847 P.O. Box 530954 Atlanta, GA 30353-0954 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,131.73 |
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| 3.102 | Nonpriority creditor's name and mailing address Lowery Masonry, LLC P.O. Box 750516 Houston, TX 77275 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$40,757.00 |
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| 3.103 | Nonpriority creditor's name and mailing address Luebe Jones, Inc. d/b/a Avadek c/o Charles E. Lobb Jr. Murray Lobb, PLLC 700 Gemini, Suite 115 Houston, TX 77058 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
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| 3.104 | Nonpriority creditor's name and mailing address Marchal/Stevenson Elev. Co. 11050 W. Little York, Bldg. E Houston, TX 77041-5014 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,287.20 |
| <hr/> | | | |
| 3.105 | Nonpriority creditor's name and mailing address McLemore Bldg. Maintenance, Inc. 110 Fargo Street Houston, TX 77006-2014 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$1,414.40 |
| <hr/> | | | |
| 3.106 | Nonpriority creditor's name and mailing address Melton & Melton, L.L.P. 6002 Rogerdale, Suite 200 Houston, TX 77072 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$23,478.00 |
| <hr/> | | | |
| 3.107 | Nonpriority creditor's name and mailing address Meyerland Glass & Mirror Co. 12922 Murphy Road Stafford, TX 77477 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| <hr/> | | | |
| 3.108 | Nonpriority creditor's name and mailing address MGC, Inc. 6800 Sands Point Drie Houston, TX 77074 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$24,074.00 |
| <hr/> | | | |
| 3.109 | Nonpriority creditor's name and mailing address MHC Consulting, Inc. P.O. Box 9057 Spring, TX 77387 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$4,600.00 |
| <hr/> | | | |
| 3.110 | Nonpriority creditor's name and mailing address Millis Equipment 931 Pheasant Valley Drive, Suite 240 Missouri City, TX 77489 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |

| Debtor Name | Fretz Construction Company | Case number (if known) | 17-33832 |
|-------------|--|---|-------------------|
| 3.111 | Nonpriority creditor's name and mailing address Minuteman Press Downtown 2117 Chenevert Street, Suite A Houston, TX 77003 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$288.85 |
| 3.112 | Nonpriority creditor's name and mailing address Mobile Mini, Inc. P.O. Box 7144 Pasadena, CA 91109-7144 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,690.53 |
| 3.113 | Nonpriority creditor's name and mailing address Montalbano Lumber 1309 Houston Avenue Houston, TX 77007-6296 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,594.57 |
| 3.114 | Nonpriority creditor's name and mailing address Naegeli Transportation 7201 Easthaven Blvd. Houston, TX 77017-6597 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$390.00 |
| 3.115 | Nonpriority creditor's name and mailing address National Construction Rentals 16207 Aldine Westfield Houston, TX 77032 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,382.57 |
| 3.116 | Nonpriority creditor's name and mailing address National Terrazzo Tile & Marble, Inc. 5728 HoodStreet Houston, TX 77023 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.117 | Nonpriority creditor's name and mailing address Occupational Health Centers of Southwest P.O. Box 9005 Addison, TX 75001-9005 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$54.00 |

Debtor **Fretz Construction Company**
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3.118 Nonpriority creditor's name and mailing address
Overhead Door Company of Houston
11533 South Main
Houston, TX 77025
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

3.119 Nonpriority creditor's name and mailing address
Pampered Lawns, Inc.
5602 Centralcrest
Houston, TX 77092
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

3.120 Nonpriority creditor's name and mailing address
Peak Roofing, Inc.
P.O. Box 70768
Houston, TX 77270-0768
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

3.121 Nonpriority creditor's name and mailing address
Pella Products of Houston
8700 Fallbrook Drive
Houston, TX 77064
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

3.122 Nonpriority creditor's name and mailing address
Pinnacle Structural Engineers
3120 Southwest Freeway, Suite 410
Houston, TX 77098
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

\$1,640.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Goods & Services**Is the claim subject to offset? ☒ No ☐ Yes

3.123 Nonpriority creditor's name and mailing address
Precision Demolition, LLC
5909 Gardendale Drive
Houston, TX 77092
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

3.124 Nonpriority creditor's name and mailing address
Preferred Foodservice Design Supply, Inc
3605 Willowbend Blvd., Suite 575
Houston, TX 77054
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

Debtor **Fretz Construction Company**
NameCase number (if known) **17-33832**

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| 3.125 | Nonpriority creditor's name and mailing address Pyrotex Systems, Inc. P.O. Box 1639 Alvin, TX 77512 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$715.00 |
| 3.126 | Nonpriority creditor's name and mailing address Quality Fasteners, Inc. 15023 Willis Street Houston, TX 77032-2723 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,365.84 |
| 3.127 | Nonpriority creditor's name and mailing address R & M Service., Inc. 918 W. Donovan Houston, TX 77091 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.128 | Nonpriority creditor's name and mailing address Ram Tool & Supply, Inc. P.O. Box 743487 Atlanta, GA 30374-3487 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,979.52 |
| 3.129 | Nonpriority creditor's name and mailing address Raven Mechanical, LP c/o Lisa M. Norman 1885 St. James Place, 15th Floor Houston, TX 77057 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$381,653.24 |
| 3.130 | Nonpriority creditor's name and mailing address Remedy Roofing, Inc. 21925 Franz Road, Suite 402 Katy, TX 77449 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,055.00 |
| 3.131 | Nonpriority creditor's name and mailing address Renfrow Metalsmiths 923 Wakefield Drive Houston, TX 77018 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,680.00 |

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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
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| 3.132 | Nonpriority creditor's name and mailing address Rob Pelletier Construction, Inc. 12402 Eastex Freeway Houston, TX 77039 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.133 | Nonpriority creditor's name and mailing address Rosslyn Building Systems, Inc. 10803 Donna Houston, TX 77041 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.134 | Nonpriority creditor's name and mailing address Ryder Insulation, Inc. 5810 N. Houston Rosslyn Road Houston, TX 77091 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.135 | Nonpriority creditor's name and mailing address Sani-Weld, Inc. 1614 Isom Houston, TX 77039 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,951.00 |
| | | | |
| 3.136 | Nonpriority creditor's name and mailing address Santiago Iron Works, Inc. 2237 Wisconsin Street Dallas, TX 75229 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$35,801.00 |
| | | | |
| 3.137 | Nonpriority creditor's name and mailing address Scaffold Solutions, Inc. P.O. Box 590733 Houston, TX 77259-0733 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$61,918.94 |
| | | | |
| 3.138 | Nonpriority creditor's name and mailing address Schindler Elevator Corp. 2105 Silber Road, Suite 100 Houston, TX 77055 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |

Debtor **Fretz Construction Company**
NameCase number (if known) **17-33832**

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| 3.139 | Nonpriority creditor's name and mailing address Sherwin-Williams 2821 Gulf Freeway Houston, TX 77003 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$79.74 |
| 3.140 | Nonpriority creditor's name and mailing address Southeast Texas Mobility 580 T.C. Jester Houston, TX 77007 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.141 | Nonpriority creditor's name and mailing address Southern Tile & Terrazzo, Inc. 6829 Lindbergh Houston, TX 77087 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.142 | Nonpriority creditor's name and mailing address Stainless Steel Custom Fabricators, Inc. P.O. Box 450132 Houston, TX 77245-0132 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.143 | Nonpriority creditor's name and mailing address State Comptroller of Public Accounts Revenue Accounting Div - Bankruptcy Sec P.O. Box 13528 Austin, TX 78711-3528 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.144 | Nonpriority creditor's name and mailing address Steelco, Inc. 11210 Steeplecrest Drive, Suite 260 Houston, TX 77065 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,150.00 |
| 3.145 | Nonpriority creditor's name and mailing address Steven R. Hill Const. Co., Inc. 8534 Rayson Road Houston, TX 77080 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,947.00 |

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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
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| 3.146 | Nonpriority creditor's name and mailing address Sun Coast Resources, Inc. P.O. Box 202603 Dallas, TX 75320 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$406.40 |
| | | | |
| 3.147 | Nonpriority creditor's name and mailing address Sunbelt Rentals P.O. Box 409211 Atlanta, GA 30384-9211 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$24,400.61 |
| | | | |
| 3.148 | Nonpriority creditor's name and mailing address Sunset Glass Tinting 3760 Greenbriar Drive Stafford, TX 77477 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,944.40 |
| | | | |
| 3.149 | Nonpriority creditor's name and mailing address Superior Automatic Fire System 94 White Road Houston, TX 77047 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.150 | Nonpriority creditor's name and mailing address T.A. Construction Services LLC 21912 Mueschke Road, Building A Tomball, TX 77377 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.151 | Nonpriority creditor's name and mailing address T.A.S. Commercial Concrete Construction, 19319 Oil Cente Blvd. Houston, TX 77073 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$237,833.75 |
| | | | |
| 3.152 | Nonpriority creditor's name and mailing address T.W. Robinson, Inc. 16757 Squyres Rd., Suite 100 Spring, TX 77379 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$40,948.00 |

| | | | |
|--------|---|------------------------|-----------------|
| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
|--------|---|------------------------|-----------------|

| | | | |
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| 3.153 | Nonpriority creditor's name and mailing address TDC Waterproofing and Restoration, LLC 4417 Campbell Rd. Houston, TX 77041 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor w/ Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.154 | Nonpriority creditor's name and mailing address Texas Mutual Insurance Company P.O. Box 841843 Dallas, TX 75284-1843 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,643.00 |
| | | | |
| 3.155 | Nonpriority creditor's name and mailing address Texas Outhouse, Inc. P.O. Box 4509-1 Houston, TX 77210-4509 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,124.00 |
| | | | |
| 3.156 | Nonpriority creditor's name and mailing address Thomas Printworks P.O. Box 740967 Dallas, TX 75374-0967 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,745.75 |
| | | | |
| 3.157 | Nonpriority creditor's name and mailing address TLS Trucking & Contracting, Inc. 20910 Hunters Creek Way Hockley, TX 77447 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$29,981.00 |
| | | | |
| 3.158 | Nonpriority creditor's name and mailing address TNTMC P.O. Box 55544 Houston, TX 77255 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.159 | Nonpriority creditor's name and mailing address Tobin & Rooney, Inc. c/o Lisa M. Norman 1885 St. James Place, 15th Floor Houston, TX 77057 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |

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| Debtor | Fretz Construction Company Name | Case number (if known) | 17-33832 |
|--------|---|------------------------|-----------------|

| | | | |
|-------|---|---|--------------------|
| 3.160 | Nonpriority creditor's name and mailing address Triple-S Steel Supply Company P.O. Box 21119 Houston, TX 77226 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$563.29 |
| | | | |
| 3.161 | Nonpriority creditor's name and mailing address Underwood Sheetmetal, Inc. P.O. Box 70768 Houston, TX 77270 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,201.00 |
| | | | |
| 3.162 | Nonpriority creditor's name and mailing address Vaughn Construction Company 10355 Westpark Dr. Houston, TX 77042 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Note</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.163 | Nonpriority creditor's name and mailing address Vernon Masonry, Inc. P.O. Box 220 Burton, TX 77835-0020 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| | | | |
| 3.164 | Nonpriority creditor's name and mailing address VR Special Services P.O. Box 12958 Houston, TX 77217 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$27,381.06 |
| | | | |
| 3.165 | Nonpriority creditor's name and mailing address W & W Telephone Co., Inc. P.O. Box 576 Tomball, TX 77377-0576 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$340.99 |
| | | | |
| 3.166 | Nonpriority creditor's name and mailing address Western Specialty Contractors of America 8813 Fairbanks N. Houston Road Houston, TX 77064 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Subcontractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |

Debtor **Fretz Construction Company**
NameCase number (if known) **17-33832**

3.167 Nonpriority creditor's name and mailing address
Williams Scottsman, Inc
P.O. Box 91975
Chicago, IL 60693-1975
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

Unknown

☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Subcontractor**Is the claim subject to offset? ☒ No ☐ Yes

3.168 Nonpriority creditor's name and mailing address
Winstead PC
Attn: Accounts Receivables
2728 N. Harwood Street
Dallas, TX 75201
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

\$4,352.00

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Goods & Services**Is the claim subject to offset? ☒ No ☐ Yes

3.169 Nonpriority creditor's name and mailing address
Young & Sons Drywall, LP
P.O. Box 550683
Houston, TX 77255
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

\$25,390.00

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Goods & Services**Is the claim subject to offset? ☒ No ☐ Yes

3.170 Nonpriority creditor's name and mailing address
Ziegler Cooper Architects
600 Travis, Suite 1200
Houston, TX 77002
 Date(s) debt was incurred ____
 Last 4 digits of account number ____

As of the petition filing date, the claim is: Check all that apply.

\$3,072.98

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Goods & Services**Is the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
 Lines 5a + 5b = 5c.

| Total of claim amounts | |
|------------------------|-----------------|
| 5a. | \$ 0.00 |
| 5b. + | \$ 2,130,618.72 |

| | |
|-----|-----------------|
| 5c. | \$ 2,130,618.72 |
|-----|-----------------|